

## STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State WASHINGTONINFANT CASE MANAGEMENT SERVICES  
(formerly Maternity Case Management Services)

## A. Target Group:

The Department serves infants who are Medicaid clients and who meet high-risk criteria from three months of age through the month of the infant's first birthday. A high-risk infant:

## 1. Meets at least one of the following eligibility criteria:

- a. Staff concern for the parent's ability to care for infant specifically due to at least one of the following:
  - Incarceration of the mother within the last year
  - Low functioning of the infant's parent(s) (as demonstrated by examples such as: needs repeated instructions; not attuned to infant cues; leaves infant with inappropriate coregivers; parent has the equivalent of less than an 8<sup>th</sup> grade education,)
  - Mental health issue of the parent(s) that is not stabilized (issue treated or untreated)
  - Physical impairment of the infant's parent
  - Infant's mother is experiencing post pregnancy depression or mood disorder **OR** has a history of depression/mood disorder
  - Inability to access resources due to age: 19 years old or younger
  - Social isolation (as demonstrated by examples such as: family is new to the community; parent(s) does not have a support system; family moves frequently; lack of supportive living environment)\_
  - Inability to access resources due to language or cultural barrier (as demonstrated by examples such as: speaks only Mixteco; recently arrived from Guatemala and speaks no English; recently arrived from Mexico and is having difficulty navigating health care system)
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-OR-

- b. Staff concern for the safety of infant specifically due to at least one of the following:

- Domestic or family violence in present or past relationship which keep the parent feeling unsafe
- Substance abuse by the infant's mother and/or father that is impacting ability to parent
- Secondhand smoke exposure to the infant
- CPS involvement within the last year **OR** mother/father had parental rights terminated in the past

-OR-

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## Infant Case Management Services (cont.)

- Unstable living situation (as demonstrated by examples such as: homelessness; couch surfing; unsafe conditions; no cooking facilities, heat or water)

-OR-

- c. Staff concern for infant health needs specifically due to at least one of the following:

- LBW (low birth weight - less than 5.5 pounds)
- Premature birth (less than 37 weeks gestation)
- Failure to thrive (as demonstrated by examples such as: baby is not gaining weight; significant feeding difficulty; no eye contact; baby is listless)
- Multiple birth (twins or more infants)
- Excessive fussiness or infant has irregular sleeping patterns (as demonstrated by examples such as: parent(s)' sleep deprivation, exhaustion and/or need for respite childcare)
- Infant has an identified medical problem or disability

2. Infant's parent(s) demonstrates need for a case manager's assistance in accessing medical services or other social and health services.

3. Title XIX targeted case management services may not be duplicated. This is clearly explained in the ICM Billing Instructions and training materials furnished to providers. If the high-risk infant and family are involved in services for another targeted group, ICM is closed and case management for the other targeted group is initiated.

## B. Areas of state in which services will be provided:

☒ Entire State

☐ Only in the following geographic areas (authority of Section 1915(g)(1) of the Act is invoked to provide services less than statewide.)

## C. Comparability of services:

☐ Services are provided in accordance with Section 1902(a)(10)(B) of the Act.

☒ Services are not comparable in amount, duration, and scope. Authority of Section 1915 (g) (1) of the Act is invoked to provide services without regard to the requirements of Section 1902 (a) (10) (B) of the Act.

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## Infant Case Management Services (cont.)

## D. Definition of Services:

Infant case management is an ongoing process to assist eligible clients in gaining access to and effectively using necessary medical, educational, social and other services.

The core functions of the case manager are to provide or assist in providing:

*Assessment:* This component includes activities that focus on needs identification. Activities include assessment of an eligible individual to determine the need for any medical, educational, social, and other services. Specific assessment activities include: taking client history, identifying the needs of the individual, and completing related documentation. It also includes gathering information from other sources such as family members, medical providers, and educators, if necessary, to form a complete assessment of the Medicaid eligible individual.

*Care Planning:* This component builds on the information collected through the assessment phase and includes activities such as ensuring the active participation of the Medicaid eligible individual and working with the individual and others to develop goals and identify a course of action to respond to the assessed needs of the Medicaid eligible individual. The goals and actions in the care plan should address medical, social, educational, and other services needed by the Medicaid eligible individual.

*Referral & Linkage:* This component includes activities that help link Medicaid eligible individuals with medical, social, and educational providers and/or other programs and services that are capable of providing needed services. For example, making referrals to providers for needed services and scheduling appointments may be considered case management.

*Monitoring/Follow-up:* This component includes activities and contacts that are necessary to ensure the care plan is effectively implemented and adequately addressing the needs of the Medicaid eligible individual. The activities and contact may be with the Medicaid eligible individual, family members, providers, or other entities. These may be as frequent as necessary to help determine such things as (i) whether services are being furnished in accordance with a Medicaid eligible individual's care plan, (ii) the adequacy of the services in the care plan, and (iii) changes in the needs or status of the Medicaid eligible individual. This function includes making necessary adjustments in the care plan and service arrangements with providers.

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## Infant Case Management Services (cont.)

- E. Qualifications of Providers: The Medical Assistance Administration will assign Medical Provider Numbers to the following for the provision of Case Management services:

## 1. Infant Case Managers

- a. A case manager will be either a professional or a paraprofessional under the direct supervision of a professional.
- b. Case managers will have a minimum level of work-related experience involving contact with the public in a client service setting as outlined in the Qualifications below.
  - A current professional of the integrated Maternity Support Services team (i.e., community health nurse, behavioral health specialist, and nutritionist).

-OR-

- A person with a Bachelor's (or Master's) degree in social service-related field such as: social work, behavioral sciences, psychology, child development, certified home and family life teacher, mental health counselor **plus** one year of experience working in community social services, public health services, crisis intervention, outreach and linkage program or other related field.

-OR-

- A paraprofessional with a two-year Associate of Arts (AA) degree in social services **and** two years of full time experience in community social services or related field. This staff person must receive monthly clinical supervision by a BA or Master's prepared person.

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## Infant Case Management Services (cont.)

## F. Case Management Agencies:

- a. Public or private social, health or education agencies employing staff with case manager qualifications.
- b. Demonstrate linkages and referral ability with essential social and health agencies and individual practitioners.
- c. Have experience working with low-income families, especially pregnant and parenting women and children.
- d. Meet applicable state and federal laws and regulations governing the participation of providers in the Medicaid program.

## G. The state assures that there are no restrictions on a client's free choice of Providers in violation of Section 1902 (a) (23) of the Act.

- a. Eligible clients will have free choice to receive or not receive infant case management services.
- b. Eligible clients have free choice of the providers of infant case management.
- c. Eligible clients have free choice of the providers of other medical care under the plan.